

## PATENT APPLICATION FEE DETERMINATION RECORD

Substitute for Form PTO-875

Application or Booklet Number

APPLICATION AS FILED - PART I

(Column 1)

(Column 2).

		(Column 1)	(Column 2)
FOR	NUMBER FILED	NUMBER EXTRA	
BASIC FEE (37 CFR 1.16(a), (b), or (c))			
SEARCH FEE (37 CFR 1.16(k), (l), or (m))			
EXAMINATION FEE (37 CFR 1.16(o), (p), or (q))			
TOTAL CLAIMS (37 CFR 1.16(l))	minus 20 =	*	
INDEPENDENT CLAIMS (37 CFR 1.16(h))	minus 3 =	*	
APPLICATION SIZE FEE (37 CFR 1.16(s))	If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).		
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(g))			

\* If the difference in column 1 is less than zero, enter "0" in column 2.

**APPLICATION AS AMENDED – PART II.**

(Column 1)

(Column 2)

(Column 3)

AMENDMENT #	36/186	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total (37 CFR 1.16(d))	17	Minus	20	=
	Independent (37 CFR 1.16(h))	2	Minus	3	=
Application Size Fee (37 CFR 1.16(e))					
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))					

## SMALL ENTITY

OR

OTHER THAN  
SMALL ENTITY

RATE (\$)		ADDITIONAL FEE (\$)
X	=	
X	=	
TOTAL ADD'L FEE		

OR

OR

•

OR

OR

SMALL ENTITY	
RATE (\$)	ADDITIONAL FEE (\$)
X =	
X =	
TOTAL ADD'L FEE:	

OR

OR

**OR**

OR

AMENDMENT	(Column 1)	(Column 2)	(Column 3)
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total (37 CFR 1.16(j))	*	Minus **	=
Independent (37 CFR 1.16(h))	*	Minus ***	=
Application Size Fee (37 CFR 1.16(s))			
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))			

**RATE (\$)**

ADDI-

RATE (\$)

ADDL

RATE (\$)		ADDITIONAL FEE (\$)
X	=	
X	=	
TOTAL ADD'L FEE		

OR

OR

**OR**

OR

RATE (\$)	ADDITIONAL FEE (\$)
X	"
X	"
TOTAL ADD'L FEE	

- \* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  
 \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".  
 \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

*If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.*

09/884316  
 Application or District Number  
 BELL-0107/01005

PATENT APPLICATION FEE DETERMINATION RECORD  
 Effective October 1, 2000

CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
TOTAL CLAIMS	25	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	25 minus 20 =	5
INDEPENDENT CLAIMS	3 minus 2 =	1
MULTIPLE DEPENDENT CLAIM PRESENT	<input type="checkbox"/>	

\* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

	(Column 1)	(Column 2)	(Column 3)
CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PREVIOUS EXTRA
Total	27	25	2
Independent	3	3	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM	<input type="checkbox"/>		

01/17/05

	(Column 1)	(Column 2)	(Column 3)
CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PREVIOUS EXTRA
Total	3	25	0
Independent	1	3	0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM	<input type="checkbox"/>		

9/24/05

	(Column 1)	(Column 2)	(Column 3)
CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PREVIOUS EXTRA
Total	8	25	
Independent	5	3	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM	<input type="checkbox"/>		

\* If the only difference in column 1 is less than the only difference in column 2, enter "0" in column 3.  
 \* If the "Highest Number Previously Paid For" in THIS SPACE is less than 20, enter "20".  
 \* If the "Highest Number Previously Paid For" in THIS SPACE is less than 2, enter "2".  
 \* The "Highest Number Previously Paid For" (Total or Independent) is the highest number entered in the appropriate box in column 1.

SMALL ENTITY TYPE <input type="checkbox"/>		OR	OTHER THAN SMALL ENTITY	
RATE	FEE		RATE	FEE
BASIC FEE	365.00	OR	BASIC FEE	710.00
X50-		OR	X510-	90.00
X40-		OR	X30-	
+135-		OR	+270-	
TOTAL		OR	TOTAL	800.00

SMALL ENTITY TYPE <input type="checkbox"/>		OR	OTHER THAN SMALL ENTITY	
RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X50-		OR	X510-	86
X40-		OR	X30-	
+135-		OR	+270-	
TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	paid

SMALL ENTITY TYPE <input type="checkbox"/>		OR	OTHER THAN SMALL ENTITY	
RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X50-		OR	X510-	
X40-		OR	X30-	
+135-		OR	+270-	
TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	

SMALL ENTITY TYPE <input type="checkbox"/>		OR	OTHER THAN SMALL ENTITY	
RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X50-		OR	X510-	
X40-		OR	X30-	
+135-		OR	+270-	
TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	

Form 91 (Rev. 10/00)

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